

41

Attorney Docket No. 57,145 (46547)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S):

H. Katoh, et al.

EXAMINER:

Awad, A.

SERIAL NO.:

10/084,109

GROUP:

2675

FILED:

February 27, 2002

CONFIRMATION NO.:

6866

FOR:

DISPLAY DEVICE

DIGITALL DEVICE

Mail Stop Amendment Commissioner for Patents

P.O. Box 1450

Alexandria, Virginia 22313-1450

Dear Sir/Madam:

RECEIVED

SEP 0 9 2004

Technology Center 2600

RESPONSE TO OFFICE ACTION

The following is in response to the Office Action mailed May 7, 2004 in the 11/17/2004 AIDMNSDI 00000002 044105 picostion.

01 FC:1202

720.00 DA

The Applicants believe that a one-month extension of time is required and respectfully petition therefor. The Applicants, however, conditionally petition for a further extension of time to provide for the possibility that such a petition has been inadvertently overlooked and is required. As provided below, charge Deposit Account **04-1105** for any required fee.

CERTIFICATE OF EXPRESS MAILING

Thereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. <u>EVA38995095US</u>, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.Q. Box 1450, Alexandria, VA. 22313-1450, on the date shown below.

Dated: September 3, 2004

Signature: ARein A. Dunga (Lakelsha Bryant)

09/08/2004 RNONDRF1 00000003 10084109

D1 FC:1202

162.00 OP

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

Application or Docket Number

0/084109

CLAIMS AS FILED - PART I (Column 1)						Umn 2) SMALL ENTITY			ATITY	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			34			•		RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBE	R EXTRA		BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			123 minus 20=		*	103		X\$ 9=		OR	X\$18=	1854
IND	EPENDENT CL	/ minus 3 =		*			X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	280
* If the difference in column 1 is less than zero, enter					"0" in c	olumn 2	į	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							<u>L</u>	SMALL E	ENTITY	OR	OTHER SMALL	9
AMENDMENT A	•	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDR	Total	. 172	Minus	** 16	33	= 44		X\$ 9=		OR	X\$18=	8830
AME	Independent	* OF MI	Minus	###	3 FCI AIM	= \		X42=		OR	X84=	
	FINST PRESE	NTATION OF MI	JETIPLE DEF	ENDEN	CDAIN			+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=]	X42=		OR	X84=	•
	FIRST PRESE	NTATION OF MI	ULTIPLE DEP	ENDEN	CLAIM		ال	+140=		OR	+280=	
,								TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENTC		CLAIMS REMAINING AFTER AMENDMENT	۰۰.		IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	┇	X42=		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									-000		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280= TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEEOR												
	The "Highest Nun	nber Previously Pa	id For" (Total or	Independ	lent) is the	highest numb	er fou	ind in the app	propriate box	in co	tumn 1.	